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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a wall CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application of Doctor Ny Effective December 8, 2004 Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1). (Column 2) NUMBER EXTRA NUMBER FILED FEE (1) FOR RATE (\$1 FEE 61 RATE (\$1 BASIC FEE 300.00 NIA 150.00 N/A NA N/A (37 CFR 1 16(4) (6) a (c)) SEARCHFEE \$250 \$500 NIA N/A NIA NVA (37 CFR 1 16(N. (4. or (m) **EXAMINATION FEE** \$200 NA N/A NA \$100 N/A (37 CFR 1 16(0), (p), or (q)) TOTAL CLAHAS X\$ 25 X\$50 OR 07.0FR 146(1) minus 20 = INDEPENDENT CLAIMS X100 X200 minus 3 * (27 CFR 1 16(N)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each FEE . Q7 CFR 1 16(4)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) +180= **+360*** MUNITIPLE DEPENDENT CLAIM PRESENT (37 OFR 1 16(1)) TOTAL TOTAL • If the difference in column 1 is less than zero, enter "O" in column 2. APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 3): SMALL ENTITY (Column 2) SMALL ENTITY (Column 1) HIGHEST CLAIMS PRESENT NUMBER RATE (S) RATE (\$) ADDI-ADDI-REMAINING **EXTRA** TIONAL TIONAL PREVIOUSLY AFTER FEE (1) FEE (\$) AMENDMENT PAID FOR Minus Total X\$ 25 X\$50 OR Independent Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) **4180**= +360= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.160) OR TOTAL TOTAL OR ADD'L FEE ADD'T FEE (Column 3) (Column 2) (Column 1) CLAIMS HIGHEST PRESENT ADOL-RATE (1) ADDI-RATE (\$) REMAINING NUMBER TIONAL **EXTRA** TIONAL PREVIOUSLY AFTER. FEE (\$) FEE (\$) PAID FOR **AMENDMENT** Minus Total X\$ 25 X\$50 OR Independent (S7 CFR 1.14(h)) Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) +360= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.160) +180= OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "fighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

E collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, buding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments the amount of line you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief, Information Officer, U.S. Patent 1 Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS DRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.